with the full list of names. Do not include addresses here.)

UNITED S	STATES	DISTRICT	COURTED JUL -2	AM IO: 20
	£.	41		α

for the

Northern District of Texas

DEJUTY CLERK

Dallas Division

3-20CV1760-X Case No. (to be filled in by the Clerk's Office) PAUL POGORZELSKI Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. Jury Trial: (check one) ✓ Yes If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) DALLAS POLICE DEPARTMENT CITY OF DALLAS STATE OF TEXAS Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain; an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	PAUL POGORZELSKI					
Address	6049 75TH AVE GLENDALE QUEENS NEW YORK 11385					
	GLENDALE	NY	11385			
	City	State	Zip Code			
County	QUEENS		•			
Telephone Number	(917) 861 2757					
E-Mail Address	PAULPRHHS@GMAIL.COM					

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

DALLAS POLICE DEPARTMENT

Defendant No. 1 Name

14dille	DALLING I GLIGE DEI AI	/ 1 MIC. 14 1				
Job or Title (if known)						
Address	1400 S LAMAR STREET					
	DALLAS	TX	75215			
	City	State	Zip Code			
County						
Telephone Number	(214)744 4444					
E-Mail Address (if known)						
	П		•			
	Individual capacity	✓ Official capa	city			
fendant No. 2	Individual capacity	Official capa	city			
fendant No. 2 Name	CITY OF DALLAS	✓ Official capa	city			
		✓ Official capa	city			
Name						
Name Job or Title (if known)	CITY OF DALLAS					
Name Job or Title (if known)	CITY OF DALLAS 1500 MARILLA STREET	DALLAS TEXAS 7	75201			
Name Job or Title (if known)	CITY OF DALLAS 1500 MARILLA STREET TEXAS CITY	DALLAS TEXAS 7	75201 75201			
Name Job or Title (if known) Address	CITY OF DALLAS 1500 MARILLA STREET TEXAS CITY	DALLAS TEXAS 7	75201 75201			

	Defendant No. 3			
	Name	STATE OF TEXAS		
	Job or Title (if known)			
	Address			
			TX	
		City	State	Zip Code
	County Tolombone Number	***************************************		
	Telephone Number E-Mail Address (if known)			
	D-Mail Addiess (g klown)			
		Individual capacity	✓ Official cape	city
	Defendant No. 4			
	Name			
	Job or Title (if known)			
	Address			
		City	State	Zip Code
	County Tolonhous Number	\$P\$\$		
	Telephone Number E-Mail Address (if known)			
		Individual capacity	Official capa	city
Basi	s for Jurisdiction			
imm <i>Fede</i>	er 42 U.S.C. § 1983, you may sue statunities secured by the Constitution and aral Bureau of Narcotics, 403 U.S. 38 itutional rights.	d [federal laws]." Under Bive	ns v. Six Unknown	Named Agents of
A.	Are you bringing suit against (chec	ck all that apply):		
	Federal officials (a Bivens cla	•••		
	State or local officials (a § 19	983 claim)		
В.	Section 1983 allows claims alleging the Constitution and [federal laws federal constitutional or statutory FIRST AMENDMENT FORTH AMENDMENT FIFTH AMENDMENT]." 42 U.S.C. § 1983. If you a	are suing under sec	tion 1983, what
C.	Plaintiffs suing under Bivens may are suing under Bivens, what consofficials?	only recover for the violation titutional right(s) do you clain	of certain constitute is/are being viola	tional rights. If you ted by federal

D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any
	statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia."
	42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color
	of state or local law. If you are suing under Bivens, explain how each defendant acted under color of
	federal law. Attach additional pages if needed. ALL OF THE NAMED AGENCIES PLACED IN POLICY TO DELIBERATELY TRUMP MY FREEDOMS. POLICY
	ALL OF THE NAMED AGENCIES PLACED IN POLICY TO DELIBERATELY TRUMP MY FREEDOMS. POLICY
	WILL NEVER TRUMP FREEDOMS GRANTED BY GOD WRITEN IN THE CONSTITUTION.

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?
 CROWNE PLAZA DALLAS DOWNTOWN HOTEL
 1015 ELM STREET DALLAS TEXAS 75201
- B. What date and approximate time did the events giving rise to your claim(s) occur?
 31 OF MAY YEAR 2020
 18:55
- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

 ONE: I WAS ASSULTED AND BATTERD BY THE ARRESTING SERVANT WHEN HE DECIDED TO GRAB ME. TWO: I WAS NEVER READ MY RIGHTS AT ANYTIME DURING THE ARREST. THREE: I WAS SERCHED AND A FEMALE SERVAN LOOKED AND ALLOWED GAY MEN TO SEE BY USING A FLASH LIGHT TO ILLUMINATE THI AREA. FOUR: DENIED REHYDRATION ON NUMEROUS OCCASIONS. FIVE: BEING HELD AGAINST MY WILL (KIDNAPPING ME) SIX: BEING INCARCERATED FOR 38 HOURS. SIX: HARASSMENT AND INTIMIDATION WITH IN MY OPINION INTENT TO CAUSE GRATE BODILY HARM OR INJUREY.

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

FIRST AMENDMENT VIOLATION \$250,000 FORTH AMENDMENT VIOLATION \$250,000 FIFTH AMENDMENT VIOLATION 250,000 TIME SPENT INCARCERATED 380,000

FIRST AMENDMENT BECAUSE I WAS ON PUBLIC LAND WHEN I WAS ARRESTED WHILE A PEACFUL PROTEST WAS IN ACTION (NOT THAT I WAS APART OF ANY PROTEST)

FORTH AMENDMENT BECAUSE I WAS SEARCHED WITHOUT COMMITING A ACTUAL CRIME AND I WAS SEXUAL ASSULTED DURING THAT TYRANNIC ACTION. WERE GAY MEN WERE STANDING AND WHO KNOWS WHAT COULD OF PLAYED OUT.

FIFTH AMENDMENT BECAUSE I WAS DEPRIVED MY LIFE LIBERTY AND MY PURSUIT OF HAPPYNESS

I WAS INCARCERATED FOR 38:00 HOURS AND \$10,000 AN HOUR IS JUSTIFIED BECAUSE THE CONDITIONS WERE AWFUL. RUDE CORRECTIONAL STAFF WITHOUT ANY CONSIDERATION FOR HUMAN LIFE AND BASIC HUMAN NEEDS LIKE FRESH WATER AND NUTRITIOUS FOOD.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nontrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: $//\mathcal{O}_c$	2/2020		
	Signature of Plaintiff Printed Name of Plaintiff	Paul Pogorze	SK;	
B.	For Attorneys	<u> </u>		
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
		City	State	Zip Code
	Telephone Number			
	E-mail Address			

Case 3:20-cv-01760-X-BN Document 3 Filed 07/02/20 Page 7 of 7 PageID 11

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by level, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the suppose of initiating the civil docket sheet. (SEE INSTRICTIONS ON NEXT PAGE OF THIS FORM.)

(a) PLAINTIFFS				DEFEND	ANTS						_
(b) County of Residence of (E) (c) Attorneys (Firm Name, A)	KCEPT IN U.S. PLAINTIFF CA	,		County of Re NOTE: IN L THE Attorneys (If	AND CO	(IN U.S	S. <i>PLAIN</i>	REC	DALLAS ONLY) THE LOCATION CEIVEU)	
IL BASIS OF JURISDI	CTION (Place on "X" in ()	ne Bax (mlv)	III. CI	TIZENSHIP For Diversity Case	OF PI	RINCI	PALI	ARTES	BONT BUCK 6	ONSE V	o Plainti
1 U.S. Government Plaintiff	13 Federal Question (U.S. Government))	For Diversity Case n of This State	s Only) PT	F DE	r NO	RTHERN	rincipal Place	D 4	DEF
3 2 U.S. Government Defendant	Diversity (Indicate Citizensh.)	ip of Parties in Item [[])		n of Another State n or Subject of a	0		•		Principal Place Another State	□ 5 □ 6	5 6
IV. NATURE OF SUIT	Place on "X" in One Box On	shy)	For	eign Country		CI	ick here	for: Nature	of Suit Code D	escription	S.
110 Insurance 120 Marine 130 Miller Act 140 Negotiable Instrument 150 Meller Act 151 Meller Act 151 Medicare Act 151 Medicare Act 152 Recovery of Overpayment & Enforcement of Judgment 153 Recovery of Overpayment of Veteran's Benefits 160 Stockbolders' Suits 190 Other Contract 195 Contract Product Liability 196 Franchise 220 Foreclosure 230 Rent Leane & Ejectment 240 Torts to Land 245 Tort Product Liability 290 All Other Real Property	PERSONAL INJURY 310 Airplane 315 Airplane Product Liability 320 Assault, Libel & Slander 330 Federal Employers' Liability 340 Marine 345 Marine Product Liability 350 Motor Vehicle Product Liability 360 Other Personal Injury 362 Personal Injury Medical Malpractice \$540 Other Civil Rights 41 Voting 442 Employment 443 Housing/ Accommodations 445 Amer. w/Disabilities - Cher 446 Amer. w/Disabilities - Other	PERSONAL INJUR 365 Personal Injury - Product Liability Pharmacoutical Personal Injury - Product Liability Pharmacoutical Personal Injury - Product Liability PERSONAL PROPEI 370 Other Fraud 371 Truth in Leading Property Damage Product Liability Habeas Corpus: 463 Alien Detainee 510 Motions to Vacate Sentence 530 General 535 Death Penalty Other: 540 Mandamus & Oth 555 Civil Rights 555 Prison Condition 560 Civil Detainee - Conditions of Confinement	1	O Fair Labor Stands Act O Labor/Manageme Relations Relations O Railway Labor A I Family and Medic Leave Act O Other Labor Litig I Employee Retires Income Security A	ards nt et al aution sont Act	☐ 422 A ☐ 423 V ☐ 830 P ☐ 835 P ☐ 840 T ☐ 861 H ☐ 862 B ☐ 863 D ☐ 864 S	ppeal 28 //ithdraw/ 8 USC 1 opyright stent stent - Al cw Drag rademark IA (139: lack Lun IWC/DF SID Tittle SI (405() buce (U.5)	USC 158 al 57 bbreviated Application (5ff) g (923) WW (405(g)) g XVI g)) 3. Plaintiff ant) d Party	375 False C 376 Qui Ta 3729(a 400 State 410 Amitru 430 Banks 450 Comm 470 Racket Corrupi 480 Consus 485 Teleph Frotect 490 Cables 850 Securit Exchant 890 Other S 891 Agricu 893 Enviror 895 Freedo Act 896 Arbitra 899 Admin Act/Res	Claims Act m (31 USC))) espections at and Banking arce ation or Influenc t Organizati mer Credit one Consun tion Act shat TV iss/Common age tatutory Act tural Acts menental Mass mof Inform tion istrative Pro y Decision autionality or	nent g od and ons ner dities/ tions atters action
	Cite the U.S. Civil State Court Cite the U.S. Civil State III. U.S.C., Drief description of CITYRANNICAL SE UNDER RULE 2	Appellate Court that under which you a SECTION 241 SE RVANT TAKING (IS A CLASS ACTION	CTION	ened 242 SECTION	Another (specify)	rred from District	ANT CHEC	Litigatio Transfer	y if demanded in	Multidis Litigatio Direct Fil	n - le
IF ANY	(See instructions):	JUDGE	TODARY C	E BECORD		DOC	KET N	UMBER _			
FOR OFFICE USE ONLY	**************************************	SIGNATURE OF AT	IOKNEY C	r KBCUKD		·····					